

**Request for assignment of AMCOM logon and password for the  
Joint Engineering Data Management Information and Control System  
(JEDMICS) and Engineering Data Information System (EDIS) per AR 380-19 (See  
accompanying Privacy Act Statement)**

**Part I - To Be Completed By Requesting Organization**

1. Request is: ☐ New ☐ Change ☐ Cancel Logon
2. Requester is: ☐ DoD Civilian ☐ DoD Contractor ☐ Military
3. Name of Requester printed) \_\_\_\_\_
4. For Name Change, (Enter Name as Changed) \_\_\_\_\_
5. Requester's Office Symbol \_\_\_\_\_
6. SSN \_\_\_\_\_ Building Number \_\_\_\_\_
7. Phone Number ☐ Local ☐ DSN \_\_\_\_\_
8. Email address \_\_\_\_\_

**9. For DoD Contractor** (All information must be provided)

Company Name/Address/Phone \_\_\_\_\_

Contract Number \_\_\_\_\_ Exp. Date \_\_\_\_\_

Government Sponsor's Name/Phone/Office Symbol \_\_\_\_\_

Attachments: Excerpt from Scope of Work (directly out of contract),  
Clearance Letter (signed by Facility Security Manager) stating:  
requester's name, Social Security number, clearance level, clearing  
agency and date of clearance granted.

**10. Access Request** (Check applicable item(s))

- ☐ JEDMICS ☐ PC JEDMICS  
    ☐ Limited Rights (access to this data requires a clearance and a  
        detailed justification signed by the supervisor)
- ☐ EDIS  
    ☐ Current JEDMICS user  
        Current JEDMICS User ID: \_\_\_\_\_  
        Permissions listed below require a clearance and a detailed  
        justification signed by the supervisor  
        Data Access to:  
            ☐ Limited Rights ☐ Procurement Sensitive  
            ☐ Other (Specify) \_\_\_\_\_  
        Permissions:  
        Group Member of:  
            ☐ 0 - AdHoc ☐ 13 - TEST  
            ☐ 1 - Daily Downloads ☐ 14 - Event5 PRE  
            ☐ 2 - TDA ☐ 15 - Event5 LIVE  
            ☐ 3 - WDD ☐ 16 - SAA  
            ☐ 4 - PKG ☐ 17 - EBT  
            ☐ 5 - RSD ☐ 18 - EBV  
            ☐ 6 - ENS ☐ 19 - SDP  
            ☐ 7 - QA AVN ☐ 20 - TRANS  
            ☐ 8 - QEZ ☐ 21 - DIA  
            ☐ 9 - SSI ☐ 22 - System  
            ☐ 10 - TDM ☐ 23 - AVE  
            ☐ 11 - SSL ☐ 24 - ENF  
            ☐ 12 - STE ☐ 25 - HAC
- ☐ Email notification on datalist transfer.  
            ☐ Email notification on pullfile run.

**11. Justification for Requested Access** \_\_\_\_\_

\_\_\_\_\_

**12. Signatures** (All blanks must be completed)

Requester \_\_\_\_\_ Date \_\_\_\_\_

Terminal Area Security Officer (include TASO appointment memorandum)

TASOs Name/Title/OFC/Phone (printed) \_\_\_\_\_

TASOs Signature \_\_\_\_\_ Date \_\_\_\_\_

Supervisors Name/Title/OFC/Phone (printed) \_\_\_\_\_

Supervisors Signature\_\_\_\_\_.

## Part II - To Be Completed By Security Office

**1. Security Clearance Verification:** The requester is certified as:  
( ) No Clearance ( ) Secret ( ) Interim (Expires: \_\_\_\_\_)  
Performing Agency/Expiration \_\_\_\_\_  
**2.** Login IDs / Passwords have been assigned to the requester named in  
Part  
I as:  
( ) Login ID(s): \_\_\_\_\_  
Comments: \_\_\_\_\_  
Access Approved/Granted by: \_\_\_\_\_ Date \_\_\_\_\_

## Part III - Requester's Acknowledgement Statement (To be completed by the requester named in Part I)

1. I hereby acknowledge personal receipt of the Login ID and Passwords(s),  
for the JEDMICS System. I realize that I am personally responsible for  
any activities in the system accountable to my Login ID and Password. I  
will not allow my password to be used by another person, nor will I  
allow others to "piggy-back" on my session. I will abide by the  
provisions of AR 380-19 and, if my password is one providing access to  
classified defense information, of AR 380-5. In the event my password is  
lost, forgotten, or I suspect it has been compromised, I will report  
immediately to my Terminal Area Security Officer (TASO) or the  
Information Systems Security Officer (ISSO) for JEDMICS for resolution.  
2. Printed Name \_\_\_\_\_  
3. Signature \_\_\_\_\_ Date \_\_\_\_\_

## Data Required by the Privacy Act of 1974 Title of Form: Request for Assignment of Loginid(s) and Password(s) Prescribing Directive: AR 380-19

**1. Authority:** Title 10, USC, Section 3012(g).  
**2. Principle Purpose(s):** a. Social Security Number is required as a  
unique code for identifying interactive customers of Data Processing  
Activity (DPA) 329B, Data Processing Installation (DPI) T201. b. To  
provide readily accessible data for updating on-line and manual customer  
files.  
**3. Mandatory or voluntary disclosure and effect on individual not  
providing information:** Social Security Number required for positive  
identification of request and enable retrieval of data from automated  
files concerning the individual's computer access privileges. Failure  
to furnish information may result in denial of service.